

## SALES DISCLOSURE FORM

State Form 46021 (R11/12-11)

Prescribed by Department of Local Government Finance
Pursuant to IC 6-1.1-5.5

SDF ID

 C06
 2010
 0000624

 County
 Year
 Unique ID

SDF Date: 04/30/2010

PRIVACY NOTICE: The telephone numbers and Social Security numbers of the parties on this form are confidential according to IC 6-1.1-5.5-3(d).

<b>PART 1</b> A. PRO			•	ER/GRANTEE and S				ANCI	E DOCUMENT	
			ty Number	Check box if applicable to		Complete A			rty 6. Complete Tax Billin	ng Address (if different from
A.) 06-04-0		5.003-0	021	parcel  2. Split  3. Land  4. Improvement	7726 CHEST ZIONSVILLE	TNUT EAGLE , IN 46077	СТ		10 W MARKET ST STE INDIANIAPOLIS, IN 4620	
7. Legal De	escription	of Pa	rcel A: EAGLES	NEST SECTION 6 LOT 406					1	
7. Legal De			rcel B:	2. Split 3. Land 4. Improvement					DISCLOSE VALUE OF ITE	MS LISTED IN
						TABLE I	B, ITEI	MS 1	-15	
If conditi	NO NO V V V V V V V V V V V V V V V V V	2. 3. 4. 5. 6. 7. 8. 10.	consideration.  Buyer is an adjacent Vacant land.  Exchange for other results of the second of the s	property owner.  Provide the value Table C Item 12.)  The primary use of the prosis in Table 3 Item 3.)  The business relationship but term (YY):  Colluded in transfer.  The property between March scribe in special circumstances in Table cribe cr	pperty?  petween  1 1  le C Item 3.)	2. Tota 3. Descinctly inter	I numb	er of properties of the control of t	Darcels:  Darcel	nplete ownership nip existing between 0.00
If condi	tions 13-	15 app	lv. filer is subject to disclos	sure and a disclosure filing fee	<b>9</b> .	5. Estir	mated v	/alue (	of personal property:	\$0.00
YES	NO		NDITION	and a management of the	-	6. Sale			- 1	\$2,102,145.00
	✓	13	of foreclosure or exp	ulsory transactions as a ress threat of foreclosur judgment, condemnatio	e,	YES	NO 🗹	7.	NDITION  Is the seller financing sale? If questions (8-13).	yes, answer
	✓	14		the partition of land bet joint tenants, or tenants		10. Amo	✓ ount of I	9.	Is buyer/borrower personally Is this a mortgage loan?	liable for loan?
	✓	15	. Transfer to a charity government.	not-for-profit organizati	on, or	11. Inter 12. Amo 13. Amo	unt in p	points		0.0000 \$0.00 0

INDIANA SALES DISCLOSURE FORM SDF ID: C06-2010-0000624 Page 2 D. PREPARER HEATHER AUVENSHINE **ESCROW TECH** Title Preparer of the Sales Disclosure Form 865 W. CARMEL DR. #110 HAMILTON TITLE SECURITY LLC. Address (Number and Street) CARMEL, IN 46032 City, State, and ZIP Code Telephone Number F-mail E. SELLER(S)/GRANTOR(S) PLATINUM PROPERTIIES, LLC Seller 1 - Name as appears on conveyance document Seller 2 - Name as appears on conveyance document 9757 WESTPOINT DR SUITE 600 Address (Number and Street, Address (Number and Street) INDIANAPOLIS, IN 46256 City, State, and ZIP Code City, State, and ZIP Code E-mail Telephone Number E-mail Telephone Number Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5, "Real Property Sales Disclosure Act". Signature of Seller Signature of Seller 04/30/2010 Printed Name of Seller Sign Date (MM/DD/YYYY) Printed Name of Seller Sign Date (MM/DD/YYYY) F. BUYER(S)/GRANTEE(S) - APPLICATION FOR PROPERTY TAX DEDUCTIONS - IDENTIFY ALL ITEMS THAT APPLY EAGLES NEST SUBDIVISION PARTNE Buyer 1 - Name as appears on conveyance document Buyer 2 - Name as appears on conveyance document 10 W MARKET ST STE 1990 Address (Number and Street) Address (Number and Street) INDIANIAPOLIS, IN 46204 City, State, and ZIP Code City, State, and ZIP Code Telephone Number F-mail Telephone Number F-mail THE SALES DISCLOSURE FORM MAY BE USED TO APPLY FOR CERTAIN DEDUCTIONS FOR THIS PROPERTY. IDENTIFY ALL THOSE THAT APPLY. CONDITION CONDITION YES NO YES NO ◂ Will this property be the buyer's primary ◂ 3. Homestead residence? Provide complete address of primary **4** 4. Solar Energy Heating/Cooling System residence, including county: 5. Wind Power Device 6. Hydroelectric Power Device Address (Number and Street) 7. Geothermal Energy Heating/Cooling Device Is this property a residential rental property? City, State, and ZIP Code County Would you like to receive tax statements for this **1** Does the buyer have a homestead in Indiana to property via e-mail? be vacated for this residence? If yes, provide (Provide contact information below. Please see complete address of residence being vacated, instructions for more information. Not available in all including county: counties.) Address (Number and Street) City, State, and ZIP Code Primary property owner contact name E-mail County Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5, "Real Property Sales Disclosure Act". (Note: Spouse information, Social Security and Driver's License/Other numbers are not necessary if no Homestead Deduction is being filed.) Signature of Buyer 1 Signature of Buyer 2/Spouse 04/30/2010 Sign Date (MM/DD/YYYY) Sign Date (MM/DD/YYYY) Printed Legal Name of Buyer 1 Printed Legal Name of Buyer 2/Spouse

Last 5 digits of Buyer 1 Driver's License/ID/Other Number

State Last 5 Digits of Social Security Number

Last 5 digits of Buyer 2/Spouse Driver's License/ID/Other Number

State Last 5 Digits of Social Security Number

INDIANA SALES DISCLOSURE FORM

SDF ID: C06-2010-0000624

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The county a	ssessor must veri	6							
1. Property		1	_		ure form before sendi				
	2. AV Land	3. AV Improvement	4. Value of Personal Property	5. AV Total	6. Property Class Code	7. Neighbo Cod	rhood e	8. Tax District	9. Acreage
A.)	\$400	\$0	\$0	\$400	500		3690	021	0.29
B.)									
	1	<u> </u>	10. Identify physical	changes to prop	ertv between Mar	YES	NO	CONDITION	
A	Assessor Sta	ımp	1 and date of sale.	3.5.5.	,	<b>▼</b>	□ □ Date of	11. Is form comp 12. State sales for	ee required?
						13.	04/30/2	(	n): 
						14.	Oate for 05/21/2		M/DD/YYYY):
Items 15 thre	ough 18 are to be	completed by the	assessor when validati	ng this sale:					
15 If ann	licable identify	any additional ene	ecial circumstances re	lating to validatio	on of sale	YES	NO	CONDITION	
10. 11 αργ	meable, identity	arry additional spe	olai oli oli liittista loos lo	lating to validation	or or saic.		<b>✓</b>	16. Sale valid for 17. Validation of	-
							_ /alidate	ed by: jm	
ı								<u> </u>	
ı									
PART 3 - 0	COLINTY ALI								
	COUNTY AUL	DITOR							
	OCCIVIT ACL	DITOR	1 Disclosure fee a	mount collected:	\$10	.00 YES	NO	CONDITION	
			Disclosure fee at     Other Local Fee:		\$10 \$0	.00		6. Is form comp	
	Auditor Star		2. Other Local Fee:		·	.00		Is form comp     State sales fe	ee required?
			Other Local Fee:     Total Fee Collect		\$0 \$10	.00 .00 .00		6. Is form comp	ee required?
			2. Other Local Fee: 3. Total Fee Collect 4. Auditor receipt be	red: book number:	\$0 \$10 368	.00 .00 .00		Is form comp     State sales fe	ee required?
			Other Local Fee:     Total Fee Collect		\$0 \$10	.00 .00 .00		Is form comp     State sales fe	ee required?
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	Auditor Star	np 	2. Other Local Fee:  3. Total Fee Collect  4. Auditor receipt be  5. Date of transfer  OF DEDUCTION C	eed:  cook number:  (MM/DD/YYYY):  DF ASSESSED	\$0 \$10 368 05/21/20 	.00 .00 .00 .00 .328 .110		6. Is form comp 7. State sales fe 8. Attachments	ee required?
– – – PART 4 - I	Auditor Star	np 	2. Other Local Fee:  3. Total Fee Collect  4. Auditor receipt be  5. Date of transfer	eed:  cook number:  (MM/DD/YYYY):  DF ASSESSED	\$0 \$10 368 05/21/20	.00 .00 .00 .00 .328 .110		6. Is form comp 7. State sales fe 8. Attachments	ee required?
– – – PART 4 - I	Auditor Star	np 	2. Other Local Fee:  3. Total Fee Collect  4. Auditor receipt be  5. Date of transfer  OF DEDUCTION C	pok number:  (MM/DD/YYYY):  DF ASSESSED  (YY)  E	\$0 \$10 368 05/21/20 	.00	√ variable.	6. Is form comp 7. State sales fe 8. Attachments	ee required?
PART 4 - I	Auditor Star  RECEIPT FOR	np — — — — — R STATEMENT	2. Other Local Fee:  3. Total Fee Collect  4. Auditor receipt be  5. Date of transfer  OF DEDUCTION C  SDF Date (MM/DD/YY)	Dok number:  (MM/DD/YYYY):  DF ASSESSED  (YY)	\$0 \$10 368 05/21/20 VALUATION	.00	√ variable.	6. Is form comp 7. State sales fe 8. Attachments	ee required?
PART 4 -    SDF ID  Parcel N  Check all	Auditor Star  — — — —  RECEIPT FOR  Jumber  I that apply: nestead	np  R STATEMENT  Solar Energ	2. Other Local Fee:  3. Total Fee Collect 4. Auditor receipt be 5. Date of transfer  OF DEDUCTION CO  SDF Date (MM/DD/YY)  y Wind Power	ook number:  (MM/DD/YYYY):  DF ASSESSED  (YY)  er   OF OF ASSESSED	\$0 \$10 368 05/21/20 VALUATION	.00 .00 .00 .00 .00 .00 .00 .00 .00 .00	√ variable.	6. Is form comp 7. State sales fe 8. Attachments	ee required?
PART 4 - I  SDF ID  Parcel N  Check ali  Hon	Auditor Star  RECEIPT FOR	Solar Energ	2. Other Local Fee:  3. Total Fee Collect  4. Auditor receipt be  5. Date of transfer  OF DEDUCTION C  SDF Date (MM/DD/YY)	pok number:  (MM/DD/YYYY):  DF ASSESSED  (Y)  er  perty	\$0 \$10 368 05/21/20 VALUATION  Buyer 1 - Name as appearance of Property (Nur	.00 .00 .00 .00 .00 .00 .00 .00 .00 .00	√ variable.	6. Is form comp 7. State sales fe 8. Attachments	ee required?

A person who knowingly and intentionally falsifies value of transferred real property, or omits or falsifies any information required to be provided in the sales disclosure form commits a Class C felony.



## SALES DISCLOSURE FORM

State Form 46021 (R11/12-11)

Prescribed by Department of Local Government Finance
Pursuant to IC 6-1.1-5.5

SDF ID

 C06
 2010
 0000907

 County
 Year
 Unique ID

SDF Date: 06/28/2010

PRIVACY NOTICE: The telephone numbers and Social Security numbers of the parties on this form are confidential according to IC 6-1.1-5.5-3(d).

) 06-04-07-000-025.003-021		Property Number	Check box if applicable to parcel	5. 0	Complete Ad	dress of	Prope	erty	6. Complete Tax Billing Address (if different property address)		
06-04-0	7-000-025	5.003-021	2. Split	7726 CHESTI ZIONSVILLE,		СТ			9202 N MERIDI INDIANAPOLIS	AN ST STE 300	
18964	-06		✓ 3. Land	ZIONSVILLE,	111 40077				INDIANAF OLIG	, 114 40200	
			4. Improvement								
gal D	escription	n of Parcel A: EAGL	ES NEST SECTION 6 LOT 406								
			2. Split								
			3. Land								
			4. Improvement								
gal D	escription	n of Parcel B:									
ON	IDITIO	NS - IDENTIFY ALL T	HAT APPLY		C. SALE: TABLE B				SE VALUE C	OF ITEMS LISTE	D IN
ond	ition 1 ap	pplies, filer is subject to disclos	ure and a disclosure filing fee.		1. Conv	eyanc	e dat	e (MM/DD/	yyyy): 06/28	3/2010	
ES	NO	CONDITION				•					
7		A transfer of real p consideration.	property interest for valuable	le				parcels: usual or s	ecial circums	stances related to the	nis sale.
	$\checkmark$	2. Buyer is an adjace	ent property owner.		inclu	ding th	é spe	ecification	of any less-th	an-complete owner	
		<ol><li>Vacant land.</li></ol>			intere	est and	term	is of seller	financing.		
	✓	4. Exchange for othe	r real property ("Trade").								
	✓		(Provide the value Table C Item 12.)								
	$\checkmark$	<ol> <li>Change planned in (Describe in special circumsta)</li> </ol>	n the primary use of the pro	operty?							
		,	ances in Table 3 Item 3.)								
	<b>♂</b>	7. Existence of family buyer and seller.	or business relationship by								
	<b>♂</b>	7. Existence of family	or business relationship by								
		<ol> <li>Existence of family buyer and seller.</li> <li>Land contact. Con and contract date</li> <li>Personal property</li> </ol>	r or business relationship by tract term (YY): 0 (MM/DD/YYYY): included in transfer.		YES	NO	CO	ONDITION			
	<b>✓</b>	<ol> <li>Existence of family buyer and seller.</li> <li>Land contact. Con and contract date</li> <li>Personal property         (Provide the value Table C     </li> </ol>	ror business relationship by tract term (YY): 0 (MM/DD/YYYY): included in transfer.	petween	YES	NO 🗹				ationship existing b	petween
	✓	<ol> <li>Existence of family buyer and seller.</li> <li>Land contact. Con and contract date</li> <li>Personal property         (Provide the value Table C     </li> <li>Physical changes</li> </ol>	r or business relationship by tract term (YY): 0 (MM/DD/YYYY): included in transfer.	petween	YES			Family o	d seller?	ationship existing b	
	<b>✓</b>	<ol> <li>Existence of family buyer and seller.</li> <li>Land contact. Con and contract date</li> <li>Personal property         (Provide the value Table C     </li> <li>Physical changes and date of sale.</li> </ol>	ract term (YY): 0 (MM/DD/YYYY): 1 included in transfer. Item 5.) to property between March (Describe in special circumstances in Tab	petween	YES			Family o		ationship existing b	petween
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cond		<ol> <li>Existence of family buyer and seller.</li> <li>Land contact. Con and contract date</li> <li>Personal property (Provide the value Table C</li> <li>Physical changes and date of sale.</li> <li>Partial interest. (</li> <li>Easements or righ</li> </ol>	tract term (YY): 0 (MM/DD/YYYY): 1 included in transfer. Item 5.) to property between March (Describe in special circumstances in Table (Describe in special circumstances in Table	oetween  1 1  lile C Item 3.)	Disclos	<b>✓</b> se actual	4.	Family o buyer an Amount in money, pro	d seller? of discount:		0.0
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ES	✓ ✓ ✓	<ol> <li>Existence of family buyer and seller.</li> <li>Land contact. Con and contract date</li> <li>Personal property (Provide the value Table C</li> <li>Physical changes and date of sale.</li> <li>Partial interest. (</li> <li>Easements or right</li> <li>Tondition</li> <li>Document for com</li> </ol>	tract term (YY): 0 (MM/DD/YYYY): included in transfer. Item 5.) to property between March (Describe in special circumstances in Tabl t-of-way grants.	n 1 le C Item 3.) e. result	Disclos	se actual	4. value	Family o buyer an Amount in money, pro	d seller? of discount: operty, a service, a	n agreement, or other co	0.0 nsideration.
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ES	itions 13-NO	<ol> <li>Existence of family buyer and seller.</li> <li>Land contact. Con and contract date</li> <li>Personal property (Provide the value Table C</li> <li>Physical changes and date of sale.</li> <li>Partial interest. (12. Easements or right</li> <li>Easements or right</li> <li>Document for com of foreclosure or edivorce, court order probate.</li> <li>Documents involv tenants in commo the entirety.</li> </ol>	tract term (YY): 0 (MM/DD/YYYY): 1 included in transfer. Item 5.) to property between March (Describe in special circumstances in Table (Describe in special circumstances in Table t-of-way grants.  closure and a disclosure filling fee express threat of foreclosure er, judgment, condemnation ing the partition of land bein, joint tenants, or tenants	n 1 lie C Item 3.) le C Item 3.) e. result re, nn, or tween by	5. Estim 6. Sales	se actual mated v s price: NO  v unt of I	4. value value co 7. 8. 9. oan:	Family of buyer and Amount of personal on the sel questions.	d seller? of discount: sperty, a service, a al property: ler financing s s (8-13).	sale? If yes, answer	0.0 nsideration. \$0.00 50,000.00
cond res	✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓	<ol> <li>Existence of family buyer and seller.</li> <li>Land contact. Con and contract date</li> <li>Personal property (Provide the value Table C</li> <li>Physical changes and date of sale.</li> <li>Partial interest. (12. Easements or right</li> <li>Easements or right</li> <li>Document for com of foreclosure or edivorce, court order probate.</li> <li>Documents involv tenants in commo the entirety.</li> </ol>	tract term (YY): 0 (MM/DD/YYYY): 1 included in transfer. Item 5.) to property between March (Describe in special circumstances in Table (Describe in special circumstances in Table t-of-way grants.  Closure and a disclosure filling feature and a disclosure filling feature appreciation of foreclosure and the partition of land being the partition of land land the land the partition of land land the l	n 1 lie C Item 3.) le C Item 3.) e. result re, nn, or tween by	5. Estim 6. Sales YES	se actual nated v s price: NO  v unt of I est rate	4. value value  ralue 7. 8. 9. oan:	Family of buyer and Amount of personal of personal of personal street sets of the sets of	d seller? of discount: sperty, a service, a al property: ler financing s s (8-13).	sale? If yes, answer	0.0 nsideration. \$0.00 50,000.00 r n? \$0.00

INDIANA SALES DISCLOSURE FORM SDF ID: C06-2010-0000907 Page 2 D. PREPARER STEVEN R EDWARDS CHIEF FINANCIAL OFFICER Title Preparer of the Sales Disclosure Form 9757 WESTPOINT DRIVE, STE 600 PLATINUM PROPERTIES, LLC Address (Number and Street) INDIANAPOLIS, IN 46256 SEDWARDS@PLATINUM-E-mail City, State, and ZIP Code Telephone Number E. SELLER(S)/GRANTOR(S) EAGLES NEST SUBDIVISION PRTNR Seller 1 - Name as appears on conveyance document Seller 2 - Name as appears on conveyance document 10 W MARKET ST STE 1990 Address (Number and Street) Address (Number and Street) INDIANIAPOLIS, IN 46204 City, State, and ZIP Code City, State, and ZIP Code E-mail Telephone Number E-mail Telephone Number Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5, "Real Property Sales Disclosure Act". Signature of Seller Signature of Seller 07/05/2010 Printed Name of Seller Sign Date (MM/DD/YYYY) Printed Name of Seller Sign Date (MM/DD/YYYY) F. BUYER(S)/GRANTEE(S) - APPLICATION FOR PROPERTY TAX DEDUCTIONS - IDENTIFY ALL ITEMS THAT APPLY BEAZER HOMES INDIANA, LLP Buyer 1 - Name as appears on conveyance document Buyer 2 - Name as appears on conveyance document 9202 N MERIDIAN ST STE 300 Address (Number and Street) Address (Number and Street) INDIANAPOLIS, IN 46260 City, State, and ZIP Code City, State, and ZIP Code Telephone Number F-mail Telephone Number F-mail THE SALES DISCLOSURE FORM MAY BE USED TO APPLY FOR CERTAIN DEDUCTIONS FOR THIS PROPERTY. IDENTIFY ALL THOSE THAT APPLY. CONDITION CONDITION YES NO YES NO  $\blacksquare$ Will this property be the buyer's primary ◂ 3. Homestead residence? Provide complete address of primary **4** 4. Solar Energy Heating/Cooling System residence, including county: 5. Wind Power Device 6. Hydroelectric Power Device Address (Number and Street) 7. Geothermal Energy Heating/Cooling Device Is this property a residential rental property? City, State, and ZIP Code County Would you like to receive tax statements for this **1** Does the buyer have a homestead in Indiana to property via e-mail? be vacated for this residence? If yes, provide (Provide contact information below. Please see complete address of residence being vacated, instructions for more information. Not available in all including county: counties.) Address (Number and Street) City, State, and ZIP Code Primary property owner contact name E-mail County Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5, "Real Property Sales Disclosure Act". (Note: Spouse information, Social Security and Driver's License/Other numbers are not necessary if no Homestead Deduction is being filed.) Signature of Buyer 1 Signature of Buyer 2/Spouse 07/08/2010

Printed Legal Name of Buyer 1

Last 5 digits of Buyer 1 Driver's License/ID/Other Number

Printed Legal Name of Buyer 2/Spouse

Last 5 digits of Buyer 2/Spouse Driver's License/ID/Other Number

Sign Date (MM/DD/YYYY)

State Last 5 Digits of Social Security Number

Sign Date (MM/DD/YYYY)

State Last 5 Digits of Social Security Number

INDIANA SALES DISCLOSURE FORM

SDF ID: C06-2010-0000907

Page 3

1. Property	2. AV Land	3. AV Improvement	4. Value of Personal Property	5. AV Total	6. Property Class Code	7. Neighbor	hood	8. Tax District	9. Acreage
4.)	\$400	\$0	\$0	\$400			3690	021	0.29
B.)									
,	Assessor Sta	ımp	10. Identify physical 1 and date of sale.	changes to prop	erty between Mard	13. E	NO  ate of :06/28/2  ate for 07/16/2	m received (MA	e required?
tems 15 thr	ough 18 are to be	completed by the	assessor when validati	ng this sale:		'			
15. If app	-	any additional spe	cial circumstances re	elating to validatio	on of sale.	YES  18. V	NO	16. Sale valid for 17. Validation of s	-
PART 3 -	COUNTY AUE	DITOR							
PART 3 -	COUNTY AUE		1. Disclosure fee and 2. Other Local Fee: 3. Total Fee Collect 4. Auditor receipt be 5. Date of transfer	ted:	\$10 \$5 \$15 370 07/16/20	.00 .00 .00 .888	NO	CONDITION  6. Is form compl 7. State sales fe 8. Attachments	e required?
	Auditor Stan	np 	<ol> <li>Other Local Fee:</li> <li>Total Fee Collect</li> <li>Auditor receipt be</li> </ol>	ted:  cook number:  (MM/DD/YYYY):  DF ASSESSED	\$5 \$15 370 07/16/20	.00 .00 .00 .00 .00 .00 .00 .00		6. Is form compl 7. State sales fe 8. Attachments	e required?
 PART 4 -	Auditor Stan	np 	2. Other Local Fee:  3. Total Fee Collect  4. Auditor receipt be  5. Date of transfer  OF DEDUCTION C	ted:  cook number:  (MM/DD/YYYY):  DF ASSESSED	\$5 \$15 370 07/16/20 ————— VALUATION	.00 .00 .00 .00 .00 .00 .00 .00		6. Is form compl 7. State sales fe 8. Attachments	e required?
PART 4 - SDF ID Parcel N	Auditor Stan	np 	2. Other Local Fee:  3. Total Fee Collect  4. Auditor receipt be  5. Date of transfer  OF DEDUCTION C	ted:  pok number:  (MM/DD/YYYY):  DF ASSESSED  YY)  E	\$5 \$15 370 07/16/20 ————— VALUATION	.00	nnce docu	6. Is form compl 7. State sales fe 8. Attachments	e required?
PART 4 -  SDF ID  Parcel N  Check al	Auditor Stan	np 	2. Other Local Fee: 3. Total Fee Collect 4. Auditor receipt be 5. Date of transfer  OF DEDUCTION C  SDF Date (MM/DD/YY)	ted:    Ook number:   (MM/DD/YYYY):   OF ASSESSED   YY)	\$5 \$15 370 07/16/20  VALUATION  Buyer 1 - Name as appearance of Property (Nur	.00 .00 .00 .00 .00 .00 .00 .00 .00 .00	nnce docu	6. Is form compl 7. State sales fe 8. Attachments	e required?
PART 4 -  SDF ID  Parcel N  Check al	Auditor Stan	np — — — — — R STATEMENT	2. Other Local Fee: 3. Total Fee Collect 4. Auditor receipt be 5. Date of transfer  OF DEDUCTION C  SDF Date (MM/DD/YY)	ted:  pok number:  (MM/DD/YYYY):  DF ASSESSED  YY)  er	\$5 \$15 370 07/16/20 VALUATION	.00 .00 .00 .00 .00 .00 .00 .00 .00 .00	nnce docu	6. Is form compl 7. State sales fe 8. Attachments	e required?



## SALES DISCLOSURE FORM

State Form 46021 (R11/12-11)

Prescribed by Department of Local Government Finance
Pursuant to IC 6-1.1-5.5

SDF ID

 C06
 2011
 0001972

 County
 Year
 Unique ID

SDF Date: 03/04/2011

PRIVACY NOTICE: The telephone numbers and Social Security numbers of the parties on this form are confidential according to IC 6-1.1-5.5-3(d).

PART 1	l - To	be	completed by BUY	ER/GRANTEE and S	ELLER/GI	RAN	NTOR	1			
A. PRO	PERT	TR	ANSFERRED - MU	JST BE CONVEYED	ON A SIN	GLE	100	VVEY	ANC	E DOCUMENT	
	1. P	ropert	y Number	Check box if applicable to parcel	5. 0	Comp	olete Ad	dress of	Prope		ng Address (if different from erty address)
A.) 06-04-0 021-18964-	7-000-025 ·06	.003-0	21	☐ 2. Split  ☑ 3. Land  ☑ 4. Improvement	7726 CHESTI ZIONSVILLE,			СТ		7726 CHESTNUT EAGL ZIONSVILLE, IN 46077	E CT
7. Legal De	escription	of Pa	rcel A: EAGLES	NEST SECTION 6 LOT 406							
3.)				2. Split 3. Land 4. Improvement							
. Legal De	escription	of Pa	rcel B:								
B. CON	IDITION	NS -	IDENTIFY ALL THA	AT APPLY				S DAT B, ITEN		DISCLOSE VALUE OF ITE -15	MS LISTED IN
If condi	NO NO V V V V V V V V V V V V V V V V V	1. 2. 3. 4. 5. 6. 7. 8.	A transfer of real proconsideration.  Buyer is an adjacent Vacant land.  Exchange for other results of the second points.  Change planned in the second circumstance of family of buyer and seller.  Land contact. Contract and contract date of the value Table C Item.  Physical changes to and date of sale. (De	eal property ("Trade").  (Provide the value Table C Item 12.)  ne primary use of the prosis in Table 3 Item 3.)  r business relationship but term (YY): 0  (MM/DD/YYYY): 0  Cluded in transfer.	operty?  Detween  1 1  le C Item 3.)	1. 2. 3.	Total Description interes	numberibe and ding the est and	ccc 4.	parcels:	nip existing between  0.00
	✓	12.	Easements or right-o	of-way grants.							
				sure and a disclosure filing fee	e.  -	5.				of personal property:	\$0.00
YES	NO 📈		NDITION	da amatana a a Cara a a		6.		s price:			\$313,840.00
	✓	13	of foreclosure or exp	ulsory transactions as a press threat of foreclosur judgment, condemnatio	e,		YES	NO		Is the seller financing sale? If questions (8-13).	yes, answer
	✓	14		g the partition of land bet joint tenants, or tenants			Amo	✓ ✓ unt of le	8. 9.	Is buyer/borrower personally Is this a mortgage loan?	liable for loan?
	✓	15	. Transfer to a charity government.	, not-for-profit organizati	on, or	11.	Inter	est rate unt in p	:	:	0.0000 \$0.00
						13.	Amo	rtizatio	n per	iod:	0

INDIANA SALES DISCLOSURE FORM SDF ID: C06-2011-0001972 Page 2 D. PREPARER GEORGE A KEESLING **ESCROW OFFICER** Title Preparer of the Sales Disclosure Form 9202 N MERIDIAN ST, STE #120 FIRST AMERICAN TITLE Address (Number and Street) NMERIDIAN.IN@FIRSTAM.COM INDIANAPOLIS, IN 46260 F-mail City, State, and ZIP Code Telephone Number E. SELLER(S)/GRANTOR(S) BEAZER HOMES INDIANA Seller 1 - Name as appears on conveyance document Seller 2 - Name as appears on conveyance document 9202 N MERIDIAN ST STE 300 Address (Number and Street, Address (Number and Street) INDIANAPOLIS, IN 46260 City, State, and ZIP Code City, State, and ZIP Code E-mail Telephone Number E-mail Telephone Number Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5, "Real Property Sales Disclosure Act". Signature of Seller Signature of Seller 03/04/2011 Printed Name of Seller Sign Date (MM/DD/YYYY) Printed Name of Seller Sign Date (MM/DD/YYYY) F. BUYER(S)/GRANTEE(S) - APPLICATION FOR PROPERTY TAX DEDUCTIONS - IDENTIFY ALL ITEMS THAT APPLY MARK D PASCARELLA JENNIFER A PASCARELLA Buyer 1 - Name as appears on conveyance document Buyer 2 - Name as appears on conveyance document 7726 CHESTNUT EAGLE CT 7726 CHESTNUT EAGLE CT Address (Number and Street) Address (Number and Street) ZIONSVILLE, IN 46077 ZIONSVILLE, IN 46077 City, State, and ZIP Code City, State, and ZIP Code Telephone Number F-mail Telephone Number F-mail THE SALES DISCLOSURE FORM MAY BE USED TO APPLY FOR CERTAIN DEDUCTIONS FOR THIS PROPERTY. IDENTIFY ALL THOSE THAT APPLY. CONDITION CONDITION YES NO YES NO ◂ Will this property be the buyer's primary **1** 3. Homestead residence? Provide complete address of primary **4** 4. Solar Energy Heating/Cooling System residence, including county: 5. Wind Power Device 6. Hydroelectric Power Device Address (Number and Street) 7. Geothermal Energy Heating/Cooling Device Is this property a residential rental property? City, State, and ZIP Code County Would you like to receive tax statements for this **1** Does the buyer have a homestead in Indiana to property via e-mail? be vacated for this residence? If yes, provide (Provide contact information below. Please see complete address of residence being vacated, instructions for more information. Not available in all including county: counties.) Address (Number and Street) City, State, and ZIP Code Primary property owner contact name E-mail County Under penalties of perjury, I hereby certify that this Sales Disclosure, to the best of my knowledge and belief, is true, correct and complete as required by law, and is prepared in accordance with IC 6-1.1-5.5, "Real Property Sales Disclosure Act". (Note: Spouse information, Social Security and Driver's License/Other numbers are not necessary if no Homestead Deduction is being filed.)

Signature of Buyer 1 Signature of Buyer 2/Spouse 03/04/2011 03/04/2011 Sign Date (MM/DD/YYYY) Sign Date (MM/DD/YYYY) Printed Legal Name of Buyer 1 Printed Legal Name of Buyer 2/Spouse

State Last 5 Digits of Social Security Number

Last 5 digits of Buyer 1 Driver's License/ID/Other Number

Last 5 digits of Buyer 2/Spouse Driver's License/ID/Other Number

State Last 5 Digits of Social Security Number

INDIANA SALES DISCLOSURE FORM

SDF ID: C06-2011-0001972

Page 3

1. Property	2. AV Land	y and complete items  3. AV Improvement	4. Value of Personal Property	5. AV Total	6. Property Class Code	7. Neigh	orhood	8. Tax District	9. Acreage
l.)	\$63,800	\$0	Property	\$63,800	500		3690	021	0.29
3.)									
,	Assessor Sta	mp	10. Identify physica 1 and date of sale.	I changes to prop	erty between Mard	13.	Date of 03/04/2	m received (MA	e required?
tome 15 thre	ough 19 are to be	completed by the	assessor when validat	ing this sale:					
						18		16. Sale valid for 17. Validation of sed by: NW	_
PART 3 - I	COUNTY AUE	DITOR							
PART 3 - (	COUNTY AUE		1. Disclosure fee a 2. Other Local Fee 3. Total Fee Collect 4. Auditor receipt b 5. Date of transfer	ted:	\$10 \$5 \$15 380 03/18/20	.00		CONDITION  6. Is form compl 7. State sales fe 8. Attachments	e required?
PART 4 -	Auditor Stan	np 	<ol> <li>Other Local Fee</li> <li>Total Fee Collect</li> <li>Auditor receipt b</li> </ol>	ted:  Ook number:  (MM/DD/YYYY):  DF ASSESSED  YY)  E	\$5 \$15 380 03/18/20	.00 .00 .00 .00 .036 .111	eyance docu	6. Is form compl 7. State sales fe 8. Attachments	e required?
PART 4 - SDF ID Parcel N Check al	Auditor Stan	np 	2. Other Local Fee 3. Total Fee Collect 4. Auditor receipt b 5. Date of transfer  OF DEDUCTION (  SDF Date (MM/DD/YY)	ted:  cook number:  (MM/DD/YYYY):  DF ASSESSED  YY)  er  c	\$5 \$15 380 03/18/20 VALUATION Suyer 1 - Name as appea	.00 .00 .00 .00 .00 .00 .00 .00 .00 .00	eyance docu	6. Is form compl 7. State sales fe 8. Attachments	e required?